



353574

<b>LAND-LAKE-GEN</b>  <b>POTENTIAL HAZARDOUS WASTE SITE</b> <b>PRELIMINARY ASSESSMENT</b> <b>PART 1 - SITE INFORMATION AND ASSESSMENT</b>		<b>I. IDENTIFICATION</b> 01 STATE 02 SITE NUMBER <b>ILD980677934</b>	
<b>II. SITE NAME AND LOCATION</b>			
01 SITE NAME (Legal, common, or descriptive name of site) <b>UNICAR VEHICLE WASH</b>		02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER <b>4301 OLD U.S. 41</b>	
03 CITY <b>RUSSELL</b>	04 STATE <b>IL</b>	05 ZIP CODE <b>60075</b>	06 COUNTY <b>LAKE</b>
07 COUNTY CODE <b>097</b>	08 CONG DIST <b>01</b>		
09 COORDINATES LATITUDE <b>42 30 05.6</b>		LONGITUDE <b>087 55 25.0</b>	
10 DIRECTIONS TO SITE (Starting from nearest public road) <b>WADSWORTH-7-B.</b>			
<b>SEE ATTACHMENT'S ON THE BACK</b>			
<b>III. RESPONSIBLE PARTIES</b>			
01 OWNER (If known)		02 STREET (Business, mailing, residential)	
03 CITY		04 STATE	05 ZIP CODE
07 OPERATOR (If known and different from owner)		06 TELEPHONE NUMBER ( )	
09 CITY		10 STATE	11 ZIP CODE
		12 TELEPHONE NUMBER ( )	
13 TYPE OF OWNERSHIP (Check one) <input checked="" type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL: _____ (Agency name) <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL <input type="checkbox"/> F. OTHER: _____ (Specify) <input type="checkbox"/> G. UNKNOWN			
14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply) <input type="checkbox"/> A. RCRA 3001 DATE RECEIVED: ____/____/____ <input type="checkbox"/> B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: ____/____/____ <input checked="" type="checkbox"/> C. NONE			
<b>IV. CHARACTERIZATION OF POTENTIAL HAZARD</b>			
01 ON SITE INSPECTION <input checked="" type="checkbox"/> YES    DATE <b>07/11/80</b> <input type="checkbox"/> NO    MONTH DAY YEAR		BY (Check all that apply) <input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <input checked="" type="checkbox"/> C. STATE <input type="checkbox"/> D. OTHER CONTRACTOR <input type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER: _____ (Specify)	
02 SITE STATUS (Check one) <input type="checkbox"/> A. ACTIVE <input type="checkbox"/> B. INACTIVE <input checked="" type="checkbox"/> C. UNKNOWN		03 YEARS OF OPERATION BEGINNING YEAR _____ ENDING YEAR _____ <input checked="" type="checkbox"/> UNKNOWN	
04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED  <b>NONE</b>			
05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION  <b>NONE</b>			
<b>V. PRIORITY ASSESSMENT</b>			
01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents) <input type="checkbox"/> A. HIGH (Inspection required promptly) <input type="checkbox"/> B. MEDIUM (Inspection required) <input type="checkbox"/> C. LOW (Inspect on time available basis) <input checked="" type="checkbox"/> D. NONE (No further action needed, complete current disposition form)			
<b>VI. INFORMATION AVAILABLE FROM</b>			
01 CONTACT <b>JOE CORDER</b>		02 OF (Agency/Organization) <b>EMPLOYEE</b>	
03 TELEPHONE NUMBER <b>UNKNOWN</b>			
04 PERSON RESPONSIBLE FOR ASSESSMENT <b>LARRY WINNER</b>		05 AGENCY <b>IEPA</b>	06 ORGANIZATION <b>HSPS</b>
07 TELEPHONE NUMBER <b>217-782-9848</b>		08 DATE <b>11/21/84</b> MONTH DAY YEAR	



<b>01 PHYSICAL STATES</b> <i>Check all that apply</i> A SOLID B POWDER, FINES C SLUDGE D OTHER E SLURRY F LIQUID G GAS TONS CUBIC YARDS NO. OF DRUMS <i>(Specify)</i>	<b>02 WASTE QUANTITY AT SITE</b> <i>Measures of waste quantities must be independent</i> TONS CUBIC YARDS NO. OF DRUMS	<b>03 WASTE CHARACTERISTICS</b> <i>Check all that apply</i> A TOXIC B CORROSIVE C RADIOACTIVE D PERSISTENT E SOLUBLE F INFECTIOUS G FLAMMABLE H IGNITABLE I HIGHLY VOLATILE J EXPLOSIVE K REACTIVE L INCOMPATIBLE M NOT APPLICABLE
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CATEGORY	SUBSTANCE NAME	01 GROSS AMOUNT	02 UNIT OF MEASURE	03 COMMENTS
SLU	SLUDGE			
OLW	OILY WASTE			
SOL	SOLVENTS			
PSD	PESTICIDES			
OCC	OTHER ORGANIC CHEMICALS	N/A		
IOC	INORGANIC CHEMICALS			
ACD	ACIDS			
BAS	BASES			
MES	HEAVY METALS			

[illegible]

CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER	CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER
FDS			FDS		
FDS			FDS		
FDS			FDS		
FDS			FDS		

## EPA FORM 2070-12 (7-81)



POTENTIAL HAZARDOUS WASTE SITE  
PRELIMINARY ASSESSMENT

PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

ILLD 980677934

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A GROUNDWATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED

02 ☐ OBSERVED (DATE )

04 NARRATIVE DESCRIPTION

POTENTIAL

☐ ALLEGED

01 ☐ B SURFACE WATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED

02 ☐ OBSERVED (DATE )

04 NARRATIVE DESCRIPTION

POTENTIAL

☐ ALLEGED

01 ☐ C CONTAMINATION OF AIR

03 POPULATION POTENTIALLY AFFECTED:

02 ☐ OBSERVED (DATE )

04 NARRATIVE DESCRIPTION

POTENTIAL

☐ ALLEGED

01 ☐ D FIRE/EXPLOSIVE CONDITIONS

03 POPULATION POTENTIALLY AFFECTED

02 ☐ OBSERVED (DATE )

04 NARRATIVE DESCRIPTION

POTENTIAL

☐ ALLEGED

01 ☐ E DIRECT CONTACT

03 POPULATION POTENTIALLY AFFECTED

02 ☐ OBSERVED (DATE )

04 NARRATIVE DESCRIPTION

POTENTIAL

☐ ALLEGED

01 ☐ F CONTAMINATION OF SOIL

03 AREA POTENTIALLY AFFECTED (Acres)

02 ☐ OBSERVED (DATE )

04 NARRATIVE DESCRIPTION

POTENTIAL

☐ ALLEGED

01 ☐ G DRINKING WATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED

02 ☐ OBSERVED (DATE )

04 NARRATIVE DESCRIPTION

POTENTIAL

☐ ALLEGED

01 ☐ H WORKER EXPOSURE/INJURY

03 WORKERS POTENTIALLY AFFECTED:

02 ☐ OBSERVED (DATE )

04 NARRATIVE DESCRIPTION

POTENTIAL

☐ ALLEGED

01 ☐ I POPULATION EXPOSURE/INJURY

03 POPULATION POTENTIALLY AFFECTED:

02 ☐ OBSERVED (DATE )

04 NARRATIVE DESCRIPTION

POTENTIAL

☐ ALLEGED



LAND-LAKE, CO. GEN

POTENTIAL HAZARDOUS WASTE SITE  
PRELIMINARY ASSESSMENT

## PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

## I. IDENTIFICATION

01 STATE 02 SITE NUMBER

ILD 980677934

## II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA  
04 NARRATIVE DESCRIPTION02 ☐ OBSERVED (DATE: \_\_\_\_\_)☐ POTENTIAL☐ ALLEGED01 ☐ K. DAMAGE TO FAUNA  
04 NARRATIVE DESCRIPTION (include name(s) of species)02 ☐ OBSERVED (DATE: \_\_\_\_\_)☐ POTENTIAL☐ ALLEGED01 ☐ L. CONTAMINATION OF FOOD CHAIN  
04 NARRATIVE DESCRIPTION02 ☐ OBSERVED (DATE: \_\_\_\_\_)☐ POTENTIAL☐ ALLEGED01 ☐ M. UNSTABLE CONTAINMENT OF WASTES  
(Spills, runoff, standing liquids, leaking drums)  
03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_02 ☐ OBSERVED (DATE: \_\_\_\_\_)☐ POTENTIAL☐ ALLEGED

04 NARRATIVE DESCRIPTION

01 ☐ N. DAMAGE TO OFFSITE PROPERTY  
04 NARRATIVE DESCRIPTION02 ☐ OBSERVED (DATE: \_\_\_\_\_)☐ POTENTIAL☐ ALLEGED01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs  
04 NARRATIVE DESCRIPTION02 ☐ OBSERVED (DATE: \_\_\_\_\_)☐ POTENTIAL☐ ALLEGED01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING  
04 NARRATIVE DESCRIPTION02 ☐ OBSERVED (DATE: \_\_\_\_\_)☐ POTENTIAL☐ ALLEGED

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

III. TOTAL POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

## IV. COMMENTS

V. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

IEPA - LAKE, CO. GENERAL FILE'S

## EXECUTIVE SUMMARY

Unicar Vehicle Wash, 4301 Old U.S. 41, Russell, Illinois 60075, Lake County, Lat. 42°-30'-05", Long. 087°-55'-25", Wadsworth-7-B. Person to contact: Mr. Joe Corder, Employee.

This site is a truck wash, they have a well which supplies water for the wash and 2 evaporating lagoons. The wastewater is filtered in the floor drain and then enters the lagoons. The filtered material is disposed off-site. These lagoons do not require an IEPA permit.

There is no evidence of hazardous waste disposal at this site. This Agency recommends a none priority assessment for this site.

A copy of all reports and water samples that are in IEPA files are attached to the back.

LW:jk/sp/2546d,13